HQ POCR Checklist for 241.4 Reviews

To be completed for all cases being transferred to HQCMU on an initial jurisdiction transfer or requiring a follow-up decision from HQCMU. List only actions that have occurred after the initial 90 day POCR was completed or since last worksheet was completed.

Field Office:	FNL	DCO: (b)(6)	(7)(C)	COB:	Liberia	coc:	Liberia	
A#: (b)(6)(7)	(G) A	lien's Name:	(	b)(6)(7)(C)		_Date removal	period began:	June 1, 2011
Date case comple		y sent to HQ:	12/07/11	If follow-	-up review reque	est, date case sei	nt to HQ:	02/25/12
•			tial 90 day P	OCR wo	rksheet or aft	ter last reviev	v worksheet:	
Date(s) served I-	229(a) 1)	07/07/11 2)	3)				•	
Date(s) served Ir	struction Sheet	to Alien 1)	07/07/11 2)		.3)	_		
Date case initiall	y uploaded into	e TD: 09/	/01/11					
☐ Yes ☑ No	Is this a possi	ble 241.14 case	. If so, forward	to HQCM	U upon determir	nation immediat	ely.	
☐ Yes ☑ No	Is this a Failu	re to Comply (F	TC) Case? (If y	es, the cas	e remains with t	he field)		
☐ Yes ☑ No	If FTC, was t	he alien served	with the I-229(a	)? Date(s	) Served:	1)	_2)	_3)
☐ Yes ☑ No	Judicial Stay i	in effect? (If yes	s, the case rema	ins with th	e field)	Date of Stay:		_
Yes V No	Habeas or Pet	ition for Review	pending? Cou	ırt Venue:		_Date filed:		
consulate/embissued (and tim Date 1) 07/20/20 2) 09/01/20 3) 10/24/20 4) 01/25/20 5)	Consula:  11 11 (b)(5)	nied. NOTE: r/Embassy Person, b6, b7c	TD follow-up,	at a mini	mum, must be Results regardin called const	aone every 30 ng likelihood of ul no answer ul, no answer	/ indications that days.	
List all contact final order, if it travel document for contacting  1) 09/07/20 2) 10/24/20 3) 12/01/20 4) 02/06/20	Tield efforts to nt, remains the HQTDU, at a te HOTD 11 11 (b)(6)(7)(	obtain a TD he field offices reminimum, even DU Officer Contact (C), (b)(5)	ave been unsu esponsibility u ry 30 days.	ccessful.	Results regard awaiting re pending pending	et managemen	e, field offices of issuance beria	the 75 <sup>th</sup> day post forts to obtain a are responsible
Additional Co	omments of it	normation.						
	ail in Outlook	(b)(6) )(6)(7)(C)	(7)(C)	<del></del>	r's telephone:	(b)(6)(7)(C	)	_
DO Signature				Date s		· · · · ·		6)(7)(C)
Supervisor's	email in Out	look:	(b)(6)(7)(C)	7	Supervi	isor's telepho		EB 2 7 2012
Supervisor's Revised April 20	- 9000	(b)(6)(7)(	0) 7	itle: <u>SD</u> I	<u>)0</u>	Date s	igned:	

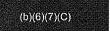


Enforcement and Removal Operations
U.S. Department of Homeland Security
500 12th Street, SW
Suite 8003
Washington, DC 20536



(b)(6)(7)(C)

CO immigration & Customs Enforcement New Orleans Field Office



#### **Decision to Continue Detention**

This letter is to inform you that the U.S. Immigration and Customs Enforcement (ICE), has reviewed your custody status and that you will not be released from custody at this time. This decision was based on a review of your file record and/or personal interview and consideration of any information you submitted to ICE reviewing officials.

17		(b)(6)(7)(C)		

A request for a travel document was submitted on your behalf to the government of Liberia. The government of Liberia has not denied issuing you a travel document and the request is still pending. Your removal to Liberia is expected to occur in the reasonably foreseeable future; therefore you are to remain in ICE custody at this time.

This decision, however, does not preclude you from bringing forth evidence in the future to demonstrate a good reason why your removal is unlikely. You are advised that pursuant to Section 241(a)(1)(C) of the Immigration and Nationality Act (INA) you must demonstrate that you are making reasonable efforts to comply with the order of removal, and that you are cooperating with ICE efforts to remove you by taking whatever actions ICE requests to effect your removal.

You are also advised that any willful failure or refusal on your part to make timely application in good faith for travel or other documents necessary for your departure, or any conspiracy or actions to prevent your removal or obstruct the issuance of a travel document, may subject you to criminal prosecution under 8 USC § 1253(a).

(b)(6)(7)(C)

Signature of HQCMU Chief

/E/15/2011 Date

(rev. 1/26/05)

FILE COPY

	PROOF O	SERVICE .		· · · · · · · · · · · · · · · · · · ·
(1) Personal Service	e (Officer to complete bo	th (a) and (b) below	•) .	
(a) I	(b)(6)(7)(C)	. DEPOR	ZATION e	PFILEZ.
certify that I served	(b)(6)(7)(C)		Title	ith a copy of
this document at	(b)(6)(7)(C) Institution	on 12/9/10 Date	_ at <u>1001</u>	OHRS,
(b) I certify the	hat I served the custodian			
	, at	Name of C	fficial	, on
Title		Institution		, VII
	ith a copy of this docume	nt.		
Date				
Date ·		R		
	ied mail, return receipt.			, certify
(2) Service by certifi  I  that I served	ied mail, return receipt.		Title	
(2) Service by certifi  I that I served N	ied mail, return receipt.  Name of ICE Officer  ame of detainee	(Attach copy of reco	Title Name of Of	ficial
(2) Service by certifi  I that I served N	ied mail, return receipt.  Name of ICE Officer  ame of detainee	(Attach copy of reco	Title	ficial
(2) Service by certifi  I that I served N	ied mail, return receipt.  Name of ICE Officer  ame of detainee	(Attach copy of reco	Title Name of Of	ficial
(2) Service by certifi  I that I served N	ied mail, return receipt.  Name of ICE Officer  ame of detainee	(Attach copy of reco	Title Name of Of	ficial
(2) Service by certifi  I that I served N	ied mail, return receipt.  Name of ICE Officer  ame of detainee	(Attach copy of reco	Title Name of Of	ficial
(2) Service by certifi  I that I served	ied mail, return receipt.  Name of ICE Officer  ame of detainee	(Attach copy of reco	Title Name of Of	ficial

# HQ POCR Checklist for 241.13 Reviews To be completed by HQ for all cases referred to CMU

To be completed. Alien Name:	(b)(6)(7)(C) Alien Number: (b)(6)(7)(C) COB: <u>Liberia</u>
CMU Officer	(b)(6)(7)(c) Date Received in Mailbox: 12/13/2011 Date Assigned to Officer: 12/13/2011
To be completed i	a z = = = = = = = = = = = = = = = = = =
⊠Yes □No	Is the case Post 180 Days?
⊠Yes □No	Is the Jurisdiction with HQ CMU? If not why:
☐Yes ⊠No	Judicial stay in effect? If yes, when entered:
☐Yes ⊠No	Habeas Pending? If yes, has assistance been requested? Yes No Attorney's name:
(b)(7)(E)	Medical/Psychological Issues? If ves. date to referred PHS/DIHS:  (b)(6), (b)(7)(C), (b)(7)(E),  (check one)  18
⊠Yes □No	(b)(6)(7)(C), (b)(7)(E)  TD Requested? If yes, list all countries where TD request was made (for Mariel Cuban's check list:)  Liberia
b7e	HQ TDU Contacted by CMU? Date: _ b7e Officer: (b)(6)(7)(C)
HQ TDU Status	(b)(5) (b)(5)
Officer Signatu	re:
To be completed by	noteunen 2 4 5 6 6 5 0 6 7 4 9 0 5 5 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6
HQ CMU Chie	f Final: Detain (b)(6)(7)(C) (2/(5/201)  Decision Initials Date
HQ CMU Chie	f Analysis & Comments (b)(6)(7)(C), (b)(5)
October 21, 2011	FILE COPY

Enforcement and Removal Operations
U.S. Department of Homeland Security
500 12th Street, SW
Suite 8003
Washington, DC 20536





C/O Immigration & Customs Enforcement New Orleans Field Office



#### **Decision to Continue Detention**

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(rev. 1/26/05)

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v	C131	UH	-	2	cıa	222

(b)(6)(7)(C)

Page		FSERVICE		
(1)	Personal Service (Officer to complete bo	th (a) and (b) below.	)	
certif	(a) IName of ICE Officer  v that I served		Title	a copy of
	y that I servedName	of detainee		
this d	ocument at Institution	on Date	_, at Tin	ne ·
	(b) I certify that I served the custodian, at	Name of O	fficial	
	Title with a copy of this docume  Date	Institution		
(2)	Service by certified mail, return receipt.			, certify
	Name of ICE Officer		Title	
	served			cial
With	a copy of this document by continue man at _	Institution		Date
Signa	iture of Detainee:	Date:		_

( ) cc: Attorney of Record or Designated Representative

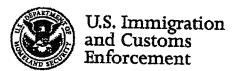
() cc: A-File

# HQ POCR Checklist for 241.13 Reviews To be completed by HQ for all cases referred to CMU

To be completed. Alien Name:	(b)(6)(7)(C)  Alien Number: (b)(6)(7)(C)  COB: Liberia
CMU Officer:	(b)(6)(7)(C) Date Received in Mailbox: 2/27/2012 Date Assigned to Officer: 2/27/2012
To be completed to	pessessessessessessessessessessessessess
⊠Yes □No	Is the case Post 180 Days?
⊠Yes □No	Is the Jurisdiction with HQ CMU? If not why:
∐Yes ⊠No	Judicial stay in effect? If yes, when entered:
∐Yes ⊠No	Habeas Pending? If yes, has assistance been requested? Yes No Attorney's name:
(b)(7)(E)	Medical/Psychological Issues? If west date to referred PHS/DIHS:  (b)(6), (b)(7)(C), (b)(7)(E),  (check one)  (23)  National Security/Special Interest Case?  (b)(6)(7)(C), (b)(7)(E)
⊠Yes □No	TD Requested? If yes, list all countries where TD request was made (for Mariel Cuban's check list:)  Liberia
b7e	HQ TDU Contacted by CMU? Date: b7e Officer: (b)(6)(7)(C)
HQ TDU Status	s Update: (b)(5)
	(b)(5)
Officer Signatu	Date: <u>2/28/2012</u>
To be completed by	9 2 4 8 9 2 5 8 2 8 8 8 8 8 8 8 8 8 8 8 2 8 2 2 2 2
HQ CMU Chie	f Final: (b)(6)(7)(C)  Decision Initials  Date
HQ CMU Chie	f Analysis & Comments (b)(5)
October 21, 2011	

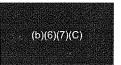
11-cv-3786.000018

Enforcement and Removal Operations
U.S. Department of Homeland Security
500 12th Street, SW
Suite 8003
Washington, DC 20536



(b)(6)(7)(C)

C/O immigration & Customs Enforcement New Orleans Field Office



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(b)(6)(7)(C)

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(b)(6)(7)(C)

Signature of HQCMU Chief

12/15/2011 Date

(rev. 1/26/05)

27

Dec	ision	- De	tain

(b)(6)(7)(C

Page	2
	_

# PROOF OF SERVICE

(a)	IName of ICE Officer	7	Title
certify that I	served		I itle with a copy
	Name of	of detainee	
this documen	t at	on	_, at
	Institution	Date	Time
(b)	I certify that I served the custodian _		
,		Name of O	fficial
	tle at		
	with a copy of this document	◆	
	•		
Date			
Date	OF se by certified mail, return receipt. (	Attach copy of rece	- '
Date	OF  se by certified mail, return receipt. (	Attach copy of rece	, certi
Date (2) Servic	OF  te by certified mail, return receipt. (  I	Attach copy of rece	, certi
Date  (2) Service  that I served	OF  ce by certified mail, return receipt. (  I	Attach copy of rece	Title  Name of Official
Date  (2) Service that I served	OF  te by certified mail, return receipt. (  I	Attach copy of rece	Title  Name of Official
Date  (2) Service that I served	OF  ce by certified mail, return receipt. (  I	Attach copy of rece	Title  Name of Official
Date  (2) Service  that I served	OF  ce by certified mail, return receipt. (  I	Attach copy of rece	Title  Name of Official on
Date  (2) Service  that I served	OF  ce by certified mail, return receipt. (  I	Attach copy of rece	Title  Name of Official on
Date  (2) Service  that I served	OF  ce by certified mail, return receipt. (  I	Attach copy of rece	Title  Name of Official on
Date  (2) Service that I served	OF  ce by certified mail, return receipt. (  I	Attach copy of rece	Title  Name of Official on
Date  (2) Service  that I served _  with a copy of	De by certified mail, return receipt. (  I	Attach copy of rece	Title  Name of Official  on  Date
Date  (2) Service  that I served _  with a copy of	OF  ce by certified mail, return receipt. (  I	Attach copy of rece	Title  Name of Official on

# HQ POCR Checklist for 241.13 Reviews To be completed by HQ for all cases referred to CMU

	Alien Name:	(b)(6)(7)(C)	Alien Number: (b)(6	)(7)(C) COB: Liberia	
	CMU Officer:	(b)(6)(7)(C) Date Re	ceived in Mailbox: <u>12/13/2</u> 0	011 Date Assigned to Officer	:_12/13/2011
	To be completed by	======================================			*******
	⊠Yes □No	Is the case Post 180 D	ays?	•	
	⊠Yes □No	Is the Jurisdiction wit	h HQ CMU? If not why:		
	□Yes ⊠No	Judicial stay in effect?	If yes, when entered:		
·	□Yes ⊠No	Habeas Pending? If y	es, has assistance been requ	ested? <b>Yes No</b> Attorney	's name:
	(b)(7)(E)			(check one)	
	⊠Yes □No	TD Requested? If ves. 1	(b)(6)(7)(C), (b)(7)(E) ist all countries where TD request	was made (for Mariel Cuban's chec	~k list:)
			Liberia	EMPERIOR OF THE STATE OF THE ST	m 1101.7
	b7e	HQ TDU Contacted b	y CMU? Date: _ b7e	Officer: (b)(6)(7)(C)	
	HQ TDU Status	Update:	(b)(5)		
			(b)(5)		
	Officer Signatur	<b>re:_</b> (b)(6)(7)(C)	Date: <u>12/14/20</u>	11	
	To be completed by (				1 E B # t
	HQ CMU Chief	Final: Detain  Decision	(b)(6)(7)(C) <b>Initials</b>		
	HQ CMU Chief	Analysis & Comments		(b)(6)(7)(C), (b)(5)	32
	Ostabou 21 2011				

### (b)(6)(7)(C) From: (b)(6)(7)(C) Sent: Tuesday, February 28, 2012 9:38 AM (b)(6)(7)(C) To: Subject: RE: SLRRFF: (b)(6)(7)(C) He has been deemed to be from Liberia. (b)(5)(b)(6)(7)(C) Immigration and Customs Enforcement Enforcement and Removal Operations 500 12th Street, SW Washington, DC 20536 (b)(6)(7)(C) From: (b)(6)(7)(C) Sent: Monday, February 27, 2012 1:22 PM To: (b)(6)(7)(C) Cc:

(b)(6)(7)(C)

(b)(6)(7)(C), (b)(5)

Thank you,

(b)(6)(7)(C)

Subject: SLRRFF: (b)(6)(7)(C)

Detention and Deportation Officer
Case Management Unit
Enforcement and Removal Operations
U.S. Immigration and Customs Enforcement
Department of Homeland Security
500 12th Street SW
Washington, D.C. 20586

(b)(6)(7)(C)